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Monday, March 17, 2014

Public Health Committee Public Hearing regarding  
HB # 5326  
An Act Concerning Compassionate Aid in Dying for the Terminally Ill

I request your favorable vote for HB # 5326: An Act Concerning Compassionate Aid in Dying for the Terminally Ill.

I witnessed how the lack of compassionate aid in dying resulted in my husband's (Joseph (Joe) Sullivan) end of life agonizing death.

Joe was:

- 1) resident at the CT Veterans Hospital, Rocky Hill; CT
- 2) in the Special Care Unit
- 3) diagnosed with severe dementia

July 6, 2007 Joe went into respiratory crisis.

Joe was:

- 1) transferred off Special Care Unit
- 2) transferred to Respiratory Unit

Since staff was not geriatric certified, no one recognized Joe was in transition. Since staff was not hospice certified, no one recognized Joe was dying. Even with legal documents stating I was Joe's health care agent/advocate, no one accepted my right to request and expect compassionate aid in dying for Joe.

Joe did not receive:

- 1) appropriate dementia care
- 2) appropriate end-of-life care

On the Respiratory Unit Joe incurred a right hip fracture.

August 4, 2007 Joe was transferred to St. Francis Hospital. Because surgery was not appropriate (would have increased Joe's pain with no benefit and been a huge waste of health care dollars), I spoke with Peg Pantoja, Assistant

Administrator, CT Veterans Hospital requesting hospice care. Ms. Pantoja assured me I did not have to speak with a discharge planner regarding other placement. She said, "Mr. Sullivan can be cared for at the hospital".

Joe was:

- 1) transferred from St. Francis Hospital back to CT Veterans Hospital
- 2) not brought to the Hospice Unit
- 3) returned to the Respiratory Unit
- 4) was not properly evaluated for hospice care

August 4 and 5, 2007 I watched Joe suffer because staff on the Respiratory Unit could not provide suitable pain management and comfort care. I was not given contact information for members of the CT Association of Home Care & Hospice consortium.

August 6, 2007 when I saw Joe on the Respiratory Unit:

- 1) he was in distress
- 2) staff neither recognized need for pain management nor attempted to provide comfort care

I demanded Joe be transferred to the Hospice Unit. On the Hospice Unit:

Joe did:

- 1) not receive appropriate pain management and comfort care
- 2) writhe in pain
- 3) have an agonizing death

Decades before Joe's early-onset Alzheimer's diagnosis, we discussed end of life care. Joe's choice was for a dignified death. Although Joe's death was neither dignified nor compassionate, you have the legislative ability to ensure no one else is refused their choice to decide what appropriate end of life care is. Do not feel intimidated to play God with the lives of your constituents.

Please support HB # 5326 An Act Concerning Compassionate Aid in Dying for the Terminally Ill.